

## HOLLISTER POLICE DEPARTMENT

## AGREEMENT REGARDING PARTICIPATION IN THE HOLLISTER POLICE RIDE-A-LONG PROGRAM

## ➤ MINIMUM OF FIVE (5) DAYS ADVANCE NOTICE REQUIRED FOR RIDE-ALONGS

I have requested permission from the Hollister Police Department to ride-a-long in a Hollister Police Patrol Vehicle with a Hollister Police Officer on official duty. I have been advised, and understand, that my presence in a patrol vehicle inevitably subjects me to substantial risk of personal harm due to the hazardous nature of law enforcement activities and the risks that official personnel must necessarily take in the course of duty.

In consideration of the granting of permission by the Chief of Police to accompany a Hollister Police Officer while on official duty, I hereby agree to abide to all departmental rules and regulations applicable to civilian participants in the ride-a-long program, and I further expressly agree not to make any claim against, sue, or hold financially or legally responsible, in any way, the city of Hollister, or any employee thereof, for, or based upon any injury to my person, however sustained, which I may suffer while I am a ride-a-long passenger in a Hollister Police patrol vehicle.

Name	CDL#	Application Date
Address		Home Phone
DOB:/ If under 18 years of	of age you must have parental co	consent: Parent Signature
Specify the date & time you wish to Ri	de-along:	
Reason for Ride-Along Request		prior to arriving for your requested ride-along.
Emergency contact: NameAddress		Home Phone Cell Phone
Records Check by:	RECORDS USE C	ONLY ne: ☐ Accepted ☐ Criminal History Attached
	HOLLISTER POLICE DEPART	TMENT USE ONLY
Received by:Watch Com	mander	Date:
Assigned to:Sergeant		Date:
Date of Ride-A-Long:		Time:
Officer assigned		Beat:
Sergeant Signature		Shift:
Signature of Rider		Date: